


Patient Name : Mrs.NIKHEESHA CHERUPALLY  
 Age/Gender : 28 Y 9 M 8 D/F  
 UHID/MR No : CASR.0000190903  
 Visit ID : CASROPV235848  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22S37388

Collected : 09/Nov/2024 08:23AM  
 Received : 09/Nov/2024 11:59AM  
 Reported : 09/Nov/2024 04:28PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF HAEMATOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HEMOGRAM , WHOLE BLOOD EDTA</b>				
HAEMOGLOBIN	14	g/dL	12.5-15	Spectrophotometer
PCV	42.60	%	36-46	Electronic pulse & Calculation
RBC COUNT	5.19	Million/cu.mm	3.8-4.8	Electrical Impedence
MCV	82.2	fL	83-101	Calculated
MCH	27.1	pg	27-32	Calculated
MCHC	32.9	g/dL	31.5-34.5	Calculated
R.D.W	13.6	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	6,670	cells/cu.mm	4000-10000	Electrical Impedence
<b>DIFFERENTIAL LEUCOCYTIC COUNT (DLC)</b>				
NEUTROPHILS	59	%	40-80	Flow cytometry
LYMPHOCYTES	31	%	20-40	Flow cytometry
EOSINOPHILS	3	%	1-6	Flow cytometry
MONOCYTES	6	%	2-10	Flow cytometry
BASOPHILS	1	%	0-2	Flow cytometry
<b>ABSOLUTE LEUCOCYTE COUNT</b>				
NEUTROPHILS	3935.3	Cells/cu.mm	2000-7000	Calculated
LYMPHOCYTES	2067.7	Cells/cu.mm	1000-3000	Calculated
EOSINOPHILS	200.1	Cells/cu.mm	20-500	Calculated
MONOCYTES	400.2	Cells/cu.mm	200-1000	Calculated
BASOPHILS	66.7	Cells/cu.mm	0-100	Calculated
Neutrophil lymphocyte ratio (NLR)	1.9		0.78- 3.53	Calculated
PLATELET COUNT	222000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-20	Modified Westergren
<b>PERIPHERAL SMEAR</b>				
RBC NORMOCYTIC NORMOCHROMIC WBC WITHIN NORMAL LIMITS PLATELETS ARE ADEQUATE ON SMEAR NO HEMOPARASITES SEEN IMPRESSION: NORMOCYTIC NORMOCHROMIC BLOOD PICTURE				



Dr.R.SHALINI  
 M.B.B.S.,M.D(Pathology)  
 Consultant Pathologist

SIN No:ASR241102925



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Dr.R.SHALINI  
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Consultant Pathologist

SIN No:ASR241102925

Apollo Health and Lifestyle Limited, Global Reference Laboratory Hyderabad

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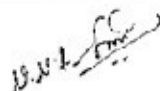
Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) Andhra Pradesh: Vizag (Seethamma Peta) Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) Mysore (VV Mohalla) Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) Uttar Pradesh: Ghaziabad (Indrapuram) Gujarat: Ahmedabad (Satellite) Punjab: Amritsar (Court Road) Haryana: Faridabad (Railway Station Road)

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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>BLOOD GROUP ABO AND RH FACTOR , WHOLE BLOOD EDTA</b>				
BLOOD GROUP TYPE	B			Microplate technology
Rh TYPE	Positive			Microplate technology

  
Dr. SRINIVAS N.S. NORI  
M.B.B.S, M.D(Pathology)  
CONSULTANT PATHOLOGY

SIN No: ASR241102925

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

**Apollo Health and Lifestyle Limited** (CIN - U85110TG2000PLC115819)  
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Patient Name : Mrs.NIKHEESHA CHERUPALLY	Collected : 09/Nov/2024 12:12PM
Age/Gender : 28 Y 9 M 8 D/F	Received : 09/Nov/2024 03:10PM
UHID/MR No : CASR.0000190903	Reported : 09/Nov/2024 03:58PM
Visit ID : CASROPV235848	Status : Final Report
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DEPARTMENT OF BIOCHEMISTRY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, FASTING , NAF PLASMA	65	mg/dL	70-100	Hexokinase

Comment:

As per American Diabetes Guidelines, 2023

Fasting Glucose Values in mg/dL	Interpretation
70-100 mg/dL	Normal
100-125 mg/dL	Prediabetes
≥126 mg/dL	Diabetes
<70 mg/dL	Hypoglycemia

Note:

- 1.The diagnosis of Diabetes requires a fasting plasma glucose of > or = 126 mg/dL and/or a random / 2 hr post glucose value of > or = 200 mg/dL on at least 2 occasions.
2. Very high glucose levels (>450 mg/dL in adults) may result in Diabetic Ketoacidosis & is considered critical.

Test Name	Result	Unit	Bio. Ref. Interval	Method
GLUCOSE, POST PRANDIAL (PP), 2 HOURS , SODIUM FLUORIDE PLASMA (2 HR)	65	mg/dL	70-140	HEXOKINASE

Comment:

It is recommended that FBS and PPBS should be interpreted with respect to their Biological reference ranges and not with each other.  
Conditions which may lead to lower postprandial glucose levels as compared to fasting glucose levels may be due to reactive hypoglycemia, dietary meal content, duration or timing of sampling after food digestion and absorption, medications such as insulin preparations, sulfonylureas, amylin analogues, or conditions such as overproduction of insulin.



Dr.Matta Sujana Reddy  
M.B.B.S,M.D(Biochemistry)  
Consultant Biochemist



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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>HBA1C (GLYCATED HEMOGLOBIN) , WHOLE BLOOD EDTA</b>				
HBA1C, GLYCATED HEMOGLOBIN	5.2	%		HPLC
ESTIMATED AVERAGE GLUCOSE (eAG)	103	mg/dL		Calculated

**Comment:**

Reference Range as per American Diabetes Association (ADA) 2023 Guidelines:

REFERENCE GROUP	HBA1C %
NON DIABETIC	<5.7
PREDIABETES	5.7 – 6.4
DIABETES	≥ 6.5
DIABETICS	
EXCELLENT CONTROL	6 – 7
FAIR TO GOOD CONTROL	7 – 8
UNSATISFACTORY CONTROL	8 – 10
POOR CONTROL	>10

**Note:** Dietary preparation or fasting is not required.

1. HbA1C is recommended by American Diabetes Association for Diagnosing Diabetes and monitoring Glycemic Control by American Diabetes Association guidelines 2023.

2. Trends in HbA1C values is a better indicator of Glycemic control than a single test.

3. Low HbA1C in Non-Diabetic patients are associated with Anemia (Iron Deficiency/Hemolytic), Liver Disorders, Chronic Kidney Disease. Clinical Correlation is advised in interpretation of low Values.


4. Falsely low HbA1c (below 4%) may be observed in patients with clinical conditions that shorten erythrocyte life span or decrease mean erythrocyte age. HbA1c may not accurately reflect glycemic control when clinical conditions that affect erythrocyte survival are present.

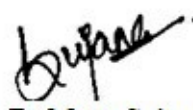
5. In cases of Interference of Hemoglobin variants in HbA1C, alternative methods (Fructosamine) estimation is recommended for Glycemic Control

A: HbF >25%

B: Homozygous Hemoglobinopathy.

(Hb Electrophoresis is recommended method for detection of Hemoglobinopathy)

  
Dr.E.Maruthi Prasad  
PhD (Biochemistry)

  
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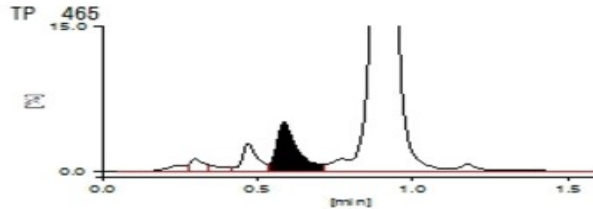
Chromatogram Report

HLC72368 V5.28 1 2024-11-09 19:56:14  
 ID ASR241102928  
 Sample No. 11090334 SL 0011 - 08  
 Patient ID  
 Name  
 Comment

CALIB	Y = 1.1973X + 0.5953		
Name	%	Time	Area
A1A	0.5	0.23	14.05
A1B	0.6	0.30	17.60
F	0.4	0.39	11.68
LA1C+	1.6	0.47	45.67
SA1C	5.2	0.59	112.19
AO	93.5	0.89	2725.01
H-V0			
H-V1			
H-V2			

Total Area 2926.20

HbA1c 5.2 % IFCC 33 mmol/mol  
HbA1 6.3 % HbF 0.4 %



09-11-2024 19:56:15 APOLLO

1 / 1

APOLLO DIAGNOSTICS GLOBAL  
 BALANAGER

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 Dr.E.Maruthi Prasad  
 PhD (Biochemistry)  
 Consultant biochemist

*Sujana*  
 Dr.Matta Sujana Reddy  
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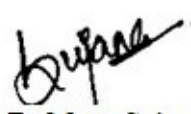
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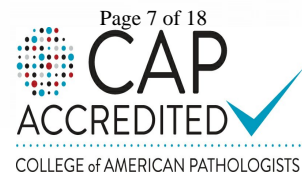
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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>LIVER FUNCTION TEST (LFT) , SERUM</b>				
BILIRUBIN, TOTAL	0.53	mg/dL	0.3-1.2	DPD
BILIRUBIN CONJUGATED (DIRECT)	0.11	mg/dL	<0.2	DPD
BILIRUBIN (INDIRECT)	0.42	mg/dL	0.0-1.1	Dual Wavelength
ALANINE AMINOTRANSFERASE (ALT/SGPT)	34	U/L	<35	IFCC
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	<b>36.0</b>	U/L	<35	IFCC
AST (SGOT) / ALT (SGPT) RATIO (DE RITIS)	1.1		<1.15	Calculated
ALKALINE PHOSPHATASE	94.00	U/L	30-120	IFCC
PROTEIN, TOTAL	7.33	g/dL	6.6-8.3	Biuret
ALBUMIN	4.42	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.91	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated

**Comment:**

LFT results reflect different aspects of the health of the liver, i.e., hepatocyte integrity (AST & ALT), synthesis and secretion of bile (Bilirubin, ALP), cholestasis (ALP, GGT), protein synthesis (Albumin) Common patterns seen:

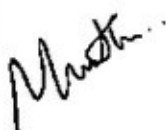
1. Hepatocellular Injury:

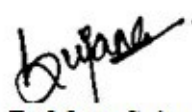
\*AST – Elevated levels can be seen. However, it is not specific to liver and can be raised in cardiac and skeletal injuries.\*ALT – Elevated levels indicate hepatocellular damage. It is considered to be most specific lab test for hepatocellular injury. Values also correlate well with increasing BMI. Disproportionate increase in AST, ALT compared with ALP. AST: ALT (ratio) – In case of hepatocellular injury AST: ALT > 1 In Alcoholic Liver Disease AST: ALT usually >2. This ratio is also seen to be increased in NAFLD, Wilson's diseases, Cirrhosis, but the increase is usually not >2.

2. Cholestatic Pattern:\*ALP – Disproportionate increase in ALP compared with AST, ALT. ALP elevation also seen in pregnancy, impacted by age and sex.\*Bilirubin elevated- predominantly direct, To establish the hepatic origin correlation with elevated GGT helps.

3. Synthetic function impairment:\*Albumin- Liver disease reduces albumin levels, Correlation with PT (Prothrombin Time) helps.

4. Associated tests for assessment of liver fibrosis - Fibrosis-4 and APRI Index.

  
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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>RENAL PROFILE/KIDNEY FUNCTION TEST (RFT/KFT) , SERUM</b>				
CREATININE	<b>0.59</b>	mg/dL	0.66 - 1.09	Modified Jaffe, Kinetic
UREA	<b>16.70</b>	mg/dL	17-43	GLDH, Kinetic Assay
BLOOD UREA NITROGEN	<b>7.8</b>	mg/dL	8.0 - 23.0	Calculated
URIC ACID	4.19	mg/dL	2.6-6.0	Uricase PAP
CALCIUM	<b>8.76</b>	mg/dL	8.8-10.6	Arsenazo III
PHOSPHORUS, INORGANIC	3.12	mg/dL	2.5-4.5	Phosphomolybdate Complex
SODIUM	<b>135</b>	mmol/L	136-146	ISE (Indirect)
POTASSIUM	3.9	mmol/L	3.5-5.1	ISE (Indirect)
CHLORIDE	103	mmol/L	101-109	ISE (Indirect)
PROTEIN, TOTAL	7.33	g/dL	6.6-8.3	Biuret
ALBUMIN	4.42	g/dL	3.5-5.2	BROMO CRESOL GREEN
GLOBULIN	2.91	g/dL	2.0-3.5	Calculated
A/G RATIO	1.52		0.9-2.0	Calculated

*Maruthi...*  
**Dr.E.Maruthi Prasad**  
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*Sujana...*  
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Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>GAMMA GLUTAMYL TRANSPEPTIDASE (GGT) , SERUM</b>	26.00	U/L	<38	IFCC



**Dr. Matta Sujana Reddy**  
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**Consultant Biochemist**



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 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>THYROID PROFILE TOTAL (T3, T4, TSH) , SERUM</b>				
TRI-IODOTHYRONINE (T3, TOTAL)	1.48	ng/mL	0.87-1.78	CLIA
THYROXINE (T4, TOTAL)	8.75	µg/dL	5.48-14.28	CLIA
THYROID STIMULATING HORMONE (TSH)	4.656	µIU/mL	0.38-5.33	CLIA

Comment:

For pregnant females	Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association)
First trimester	0.1 - 2.5
Second trimester	0.2 – 3.0
Third trimester	0.3 – 3.0

- TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH activates production of T3 (Triiodothyronine) and its prohormone T4 (Thyroxine). Increased blood level of T3 and T4 inhibit production of TSH.
- TSH is elevated in primary hypothyroidism and will be low in primary hyperthyroidism. Elevated or low TSH in the context of normal free thyroxine is often referred to as sub-clinical hypo- or hyperthyroidism respectively.
- Both T4 & T3 provides limited clinical information as both are highly bound to proteins in circulation and reflects mostly inactive hormone. Only a very small fraction of circulating hormone is free and biologically active.
- Significant variations in TSH can occur with circadian rhythm, hormonal status, stress, sleep deprivation, medication & circulating antibodies.

TSH	T3	T4	FT4	Conditions
High	Low	Low	Low	Primary Hypothyroidism, Post Thyroidectomy, Chronic Autoimmune Thyroiditis
High	N	N	N	Subclinical Hypothyroidism, Autoimmune Thyroiditis, Insufficient Hormone Treatment.
N/Low	Low	Low	Low	Secondary and Tertiary Hypothyroidism
Low	High	High	High	Primary Hyperthyroidism, Goitre, Thyroiditis, Drug effects, Early Pregnancy
Low	N	N	N	Subclinical Hyperthyroidism
Low	Low	Low	Low	Central Hypothyroidism, Treatment with Hyperthyroidism
Low	N	High	High	Thyroiditis, Interfering Antibodies
N/Low	High	N	N	T3 Thyrotoxicosis, Non thyroidal causes



Dr. Matta Sujana Reddy  
 M.B.B.S., M.D (Biochemistry)  
 Consultant Biochemist



Patient Name	: Mrs.NIKHEESHA CHERUPALLY	Collected	: 09/Nov/2024 08:23AM
Age/Gender	: 28 Y 9 M 8 D/F	Received	: 09/Nov/2024 12:22PM
UHID/MR No	: CASR.0000190903	Reported	: 09/Nov/2024 02:16PM
Visit ID	: CASROPV235848	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S37388		

DEPARTMENT OF IMMUNOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

High	High	High	High	Pituitary Adenoma; TSHoma/Thyrotropinoma
------	------	------	------	--



Dr. Matta Sujana Reddy  
M.B.B.S, M.D (Biochemistry)  
Consultant Biochemist



Patient Name : Mrs.NIKHEESHA CHERUPALLY  
 Age/Gender : 28 Y 9 M 8 D/F  
 UHID/MR No : CASR.0000190903  
 Visit ID : CASROPV235848  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22S37388

Collected : 09/Nov/2024 08:23AM  
 Received : 09/Nov/2024 04:38PM  
 Reported : 09/Nov/2024 05:50PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
<b>COMPLETE URINE EXAMINATION (CUE) , URINE</b>				
<b>PHYSICAL EXAMINATION</b>				
COLOUR	YELLOW		PALE YELLOW	Scattering of light
TRANSPARENCY	CLEAR		CLEAR	Scattering of light
pH	5.5		5-7.5	Bromothymol Blue
SP. GRAVITY	1.019		1.002-1.030	Bromothymol Blue
<b>BIOCHEMICAL EXAMINATION</b>				
URINE PROTEIN	NEGATIVE		NEGATIVE	PROTEIN ERROR OF INDICATOR
GLUCOSE	NEGATIVE		NEGATIVE	GOD-POD
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Diazonium Salt
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Sodium nitro prusside
UROBILINOGEN	NORMAL		NORMAL (0.1-1.8mg/dl)	Diazonium salt
NITRITE	NEGATIVE		NEGATIVE	Sulfanilic acid
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Diazonium salt
<b>CENTRIFUGED SEDIMENT WET MOUNT AND MICROSCOPY</b>				
PUS CELLS	3	/hpf	0-5	Automated Image based microscopy
EPITHELIAL CELLS	4	/hpf	< 10	Automated Image based microscopy
RBC	0	/hpf	0-2	Automated Image based microscopy
CASTS	ABSENT	/lpf	0-2 Hyaline Cast	Automated Image based microscopy
CRYSTALS	ABSENT	/hpf	Occasional-Few	Automated Image based microscopy

**Comment:**

All urine samples are checked for adequacy and suitability before examination. All abnormal chemical examination are rechecked and verified by manual methods. Microscopy findings are reported as an average of 10 high power fields.

*M. Muttavarapu*

**Dr. Muttavarapu Viswanath**  
**M.B.B.S.,M.D(Pathology)**  
 Consultant Pathologist



Patient Name : Mrs.NIKHEESHA CHERUPALLY	Collected : 09/Nov/2024 08:23AM
Age/Gender : 28 Y 9 M 8 D/F	Received : 09/Nov/2024 04:38PM
UHID/MR No : CASR.0000190903	Reported : 09/Nov/2024 05:50PM
Visit ID : CASROPV235848	Status : Final Report
Ref Doctor : Self	Sponsor Name : ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID : 22S37388	

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324**

*M. Muttavarapu Viswanath*

**Dr. Muttavarapu Viswanath**  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist



Patient Name	: Mrs.NIKHEESHA CHERUPALLY	Collected	: 09/Nov/2024 08:23AM
Age/Gender	: 28 Y 9 M 8 D/F	Received	: 09/Nov/2024 04:33PM
UHID/MR No	: CASR.0000190903	Reported	: 09/Nov/2024 07:22PM
Visit ID	: CASROPV235848	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S37388		

DEPARTMENT OF CLINICAL PATHOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(POST PRANDIAL)	NEGATIVE		NEGATIVE	GOD-POD

*M. Muttavarapu*

Dr. Muttavarapu Viswanath  
M.B.B.S., M.D (Pathology)  
Consultant Pathologist





Patient Name	: Mrs.NIKHEESHA CHERUPALLY	Collected	: 09/Nov/2024 08:23AM
Age/Gender	: 28 Y 9 M 8 D/F	Received	: 09/Nov/2024 04:41PM
UHID/MR No	: CASR.0000190903	Reported	: 09/Nov/2024 07:22PM
Visit ID	: CASROPV235848	Status	: Final Report
Ref Doctor	: Self	Sponsor Name	: ARCOFEMI HEALTHCARE LIMITED
Emp/Auth/TPA ID	: 22S37388		

**DEPARTMENT OF CLINICAL PATHOLOGY**

**ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324**

Test Name	Result	Unit	Bio. Ref. Interval	Method
URINE GLUCOSE(FASTING)	NEGATIVE		NEGATIVE	GOD-POD

*M. Viswanath*

**Dr. Muttavarapu Viswanath**  
M.B.B.S., M.D(Pathology)  
Consultant Pathologist

Page 17 of 18  
**CAP**  
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COLLEGE of AMERICAN PATHOLOGISTS



Patient Name : Mrs.NIKHEESHA CHERUPALLY  
 Age/Gender : 28 Y 9 M 8 D/F  
 UHID/MR No : CASR.0000190903  
 Visit ID : CASROPV235848  
 Ref Doctor : Self  
 Emp/Auth/TPA ID : 22S37388

Collected : 09/Nov/2024 06:23PM  
 Received : 10/Nov/2024 02:22PM  
 Reported : 11/Nov/2024 06:24PM  
 Status : Final Report  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

DEPARTMENT OF CYTOLOGY

ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324

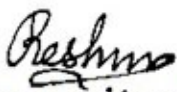
LBC PAP SMEAR , CERVICAL SAMPLE

	<b>CYTOLOGY NO.</b>	24555/24
<b>I</b>	<b>SPECIMEN</b>	
<b>a</b>	SPECIMEN ADEQUACY	ADEQUATE
<b>b</b>	SPECIMEN TYPE	CONVENTIONAL SMEAR
	SPECIMEN NATURE/SOURCE	CERVICAL SMEAR
<b>c</b>	ENDOCERVICAL-TRANSFORMATION ZONE	ABSENT
<b>d</b>	COMMENTS	SATISFACTORY FOR EVALUATION
<b>II</b>	<b>MICROSCOPY</b>	Superficial and intermediate squamous epithelial cells with benign morphology.  Inflammatory cells, predominantly neutrophils.  Negative for intraepithelial lesion/malignancy.
<b>III</b>	<b>RESULT</b>	
<b>a</b>	<b>EPITHELIAL CELL</b>	
	SQUAMOUS CELL ABNORMALITIES	NOT SEEN
	GLANDULAR CELL ABNORMALITIES	NOT SEEN
<b>b</b>	<b>ORGANISM</b>	NIL
<b>IV</b>	<b>INTERPRETATION</b>	NEGATIVE FOR INTRAEPITHELIAL LESION OR MALIGNANCY

Pap Test is a screening test for cervical cancer with inherent false negative results. Regular screening and follow-up is recommended (Bethesda-TBS-2014) revised

\*\*\* End Of Report \*\*\*

Result/s to Follow:  
 PERIPHERAL SMEAR



Dr. Reshma Stanly  
 M.B.B.S, DNB(Pathology)  
 Consultant Pathologist

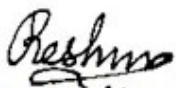


Patient Name : Mrs.NIKHEESHA CHERUPALLY  
Age/Gender : 28 Y 9 M 8 D/F  
UHID/MR No : CASR.0000190903  
Visit ID : CASROPV235848  
Ref Doctor : Self  
Emp/Auth/TPA ID : 22S37388

Collected : 09/Nov/2024 06:23PM  
Received : 10/Nov/2024 02:22PM  
Reported : 11/Nov/2024 06:24PM  
Status : Final Report  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

### TERMS AND CONDITIONS GOVERNING THIS REPORT

1. Reported results are for information and interpretation of the referring doctor or such other medical professionals, who understand reporting units, reference ranges and limitation of technologies. Laboratories not be responsible for any interpretation whatsoever.
2. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen.
3. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
4. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies.
5. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
6. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only.



Dr. Reshma Stanly  
M.B.B.S, DNB(Pathology)  
Consultant Pathologist



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SIN No: ASR241103099  
Apollo Health and Lifestyle Limited (CIN - U85110TG2000PLC115819)  
Regd. Office: 1st Floor, Apollo Health and Lifestyle Ltd, Global Reference Laboratory Hyderabad  
www.apollohl.com | Email ID: enquiry@apollohl.com, Ph No: 040-4904 7777, Fax No: 4904 7744

Address:  
A S Rao Nagar, Hyderabad, Telangana, India - 500062



1860 500 7788  
www.apolloclinic.com

APOLLO CLINICS NETWORK  
Telangana: Hyderabad (AS Rao Nagar | Chanda Nagar | Kondapur | Nallakunta | Nizampet | Manikonda | Uppal) | Andhra Pradesh: Vizag (Seethamma Peta) | Karnataka: Bangalore (Basavanagudi | Bellandur | Electronics City | Fraser Town | HSR Layout | Indira Nagar | JP Nagar | Kundalahalli | Koramangala | Sarjapur Road) | Mysore (VV Mohalla) | Tamilnadu: Chennai (Annanagar | Kotturpuram | Mogappair | T Nagar | Valasaravakkam | Velachery) | Maharashtra: Pune (Aundh | Nigdi Pradhikaran | Viman Nagar | Wanowrie) | Uttar Pradesh: Ghaziabad (Indrapuram) | Gujarat: Ahmedabad (Satellite) | Punjab: Amritsar (Court Road) | Haryana: Faridabad (Railway Station Road)

Patient Name	: Mrs. Nikheesha CHERUPALLY	Age	: 28Yrs 9Mths 9Days
UHID	: CASR.0000190903	OP Visit No.	: CASROPV235848
Printed On	: 09-11-2024 09:34 AM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employee Id	: 22S37388		

## DEPARTMENT OF RADIOLOGY

### ULTRASOUND WHOLE ABDOMEN FEMALE

**Liver** appears normal in size with increased echotexture. No focal lesion is seen. PV and CBD normal. No dilatation of the intrahepatic biliary radicals.

**Gall bladder** is distended normal. No evidence of calculus. Wall thickness appears normal. No evidence of periGB collection. No evidence of focal lesion is seen.

**Spleen** appears normal. No focal lesion seen. Splenic vein appears normal.

**Pancreas** appears normal in echopattern. No focal/mass lesion/calcification. No evidence of peripancreatic free fluid or collection. Pancreatic duct appears normal.

Both the kidneys appear normal in size, shape and echopattern. Cortical thickness and CM differentiation are maintained. No calculus / hydronephrosis seen on either side.

**Right kidney : 100x42mm. Left Kidney : 106x44mm.**

**Urinary Bladder** is well distended and appears normal. No evidence of any wall thickening or abnormality.

**Uterus** appears normal in size measures **51x33x42mm**. It shows normal shape & echo pattern. Endometrial echo-complex appears normal and measures 5 mm.

**Right ovary : 24x22mm Left ovary : 20x19mm**

Both ovaries are normal in size and shows multiple small randomly and peripherally distributed immature follicles .

**IMPRESSION:- Mild Fatty Liver.**

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**Multiple Small Randomly And Peripherally Distributed Immature Follicles Of Both Ovaries .**

**Suggested clinical correlation and further evaluation if necessary .**

---End Of The Report---



Dr.K PRAVEEN BABU

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Radiology

Patient Name	: Mrs. Nikheesha CHERUPALLY	Age	: 28Yrs 9Mths 10Days
UHID	: CASR.0000190903	OP Visit No.	: CASROPV235848
Printed On	: 10-11-2024 09:27 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S37388		

## DEPARTMENT OF CARDIOLOGY

Observation :-

1. Sinus Rhythm.
2. Heart rate is 75 beats per minutes.
3. No pathological Q wave or ST-T changes seen.
4. Normal P,QRS,T waves and axis.
5. No evidence of chamber, hypertrophy or enlargement seen.

**Impression:**

NORMAL RESTING ECG.

---End Of The Report---



DR. MRINAL .

MBBS, DIPCARD member of American college of Cardiology  
58051  
Cardiology

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Patient Name	: Mrs. Nikheesha CHERUPALLY	Age	: 28Yrs 9Mths 10Days
UHID	: CASR.0000190903	OP Visit No.	: CASROPV235848
Printed On	: 10-11-2024 05:03 AM	Advised/Pres Doctor	: --
Department	: Cardiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employeer Id	: 22S37388		

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### DEPARTMENT OF CARDIOLOGY

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#### Dimensions:

Ao (ed)	2.5 CM
LA (es)	2.8 CM
LVID (ed)	3.6 CM
LVID (es)	2.2 CM
IVS (Ed)	0.6 CM
LVPW (Ed)	0.8 CM
EF	68 %
%FD	37 %
MITRAL VALVE :	NORMAL
AML	NORMAL
PML	NORMAL
AORTIC VALVE	NORMAL
TRICUSPID VALVE	NORMAL
RIGHT VENTRICLE	NORMAL
INTER ATRIAL SEPTUM	NORMAL
INTER VENTRICULAR SEPTUM	NORMAL
AORTA	NORMAL
RIGHT ATRIUM	NORMAL
LEFT ATRIUM	NORMAL
Pulmonary Valve	NORMAL
PERICARDIUM	NORMAL
LEFT VENTRICLE:	NO EFFUSION

---

**COLOUR AND DOPPLER STUDIES**

E: 0.5 m/sec

A: 0.4 m/sec

PJV: 1.4 m/sec

AJV: 1.2 m/sec

**IMPRESSION:-**

NORMAL CHAMBER DIMENSION.

NORMAL VALVES.

NO RWMA.

LV EF;68 %

NO CLOTS/VEGETATION.

NO PERICARDIAL EFFUSION.

---End Of The Report---

DR. SHILPI MOHAN  
MBBS, MD(MEDICINE), DNB(CARDIOLOGY)  
20417  
Cardiology



Patient Name	: Mrs. Nikheesha CHERUPALLY	Age	: 28Yrs 9Mths 9Days
UHID	: CASR.0000190903	OP Visit No.	: CASROPV235848
Printed On	: 09-11-2024 01:07 PM	Advised/Pres Doctor	: --
Department	: Radiology	Qualification	: --
Referred By	: Self	Registration No.	: --
Employer Id	: 22S37388		

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**DEPARTMENT OF RADIOLOGY**

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**X-RAY CHEST PA VIEW**

Both lung fields and hila are normal .

No obvious active pleuro-parenchymal lesion seen .

Both costophrenic and cardiophrenic angles are clear .

Both diaphragms are normal in position and contour .

Thoracic wall and soft tissues appear normal.

**CONCLUSION : No obvious abnormality seen**

**For clinical correlation and further evaluation if necessary.**

---End Of The Report---



Dr.K PRAVEEN BABU

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Radiology



భారత ప్రభుత్వం  
Government of India



Aadhaar no. issued: 01/06/2011



చెరుపల్లి నిఖేశ  
Cherupally Nikheesha  
పుట్టిన తేదీ/DOB: 18/09/1996  
స్వ/ FEMALE

ఆధార్ అనేది గుర్తింపు రుజువు మాత్రమే, పౌరసత్వం లేదా పుట్టిన తేదీ కి కాదు. ఇది ధృవీకరణలో మాత్రమే ఉపయోగించాలి (ఆన్‌లైన్ ప్రమాణీకరణ లేదా QR కోడ్ / ఆఫ్‌లైన్ XML యొక్క స్కానింగ్).

**Aadhaar is proof of identity, not of citizenship or date of birth.** It should be used with verification (online authentication, or scanning of QR code / offline XML).

4732 3830 2024

నా ఆధార్, నా గుర్తింపు

**From:** Venkata Satyanarayana Karnati <VENKATA.KARNATI@bankofbaroda.com>  
**Sent:** 09 November 2024 08:01  
**To:** Asraonagar Apolloclinic  
**Subject:** Fwd: Your appointment is confirmed  
**Attachments:** pro-s3MnKbNO.jpeg

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---

**From:** noreply@apolloclinics.info <noreply@apolloclinics.info>  
**Sent:** Thursday, November 7, 2024 4:58:43 pm  
**To:** Venkata Satyanarayana Karnati <VENKATA.KARNATI@bankofbaroda.com>  
**Cc:** asraonagar@apolloclinic.com <asraonagar@apolloclinic.com>; jyothsna.thaluka@apolloclinic.com <jyothsna.thaluka@apolloclinic.com>; syamsunder.m@apollohl.com <syamsunder.m@apollohl.com>  
**Subject:** Your appointment is confirmed

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**\*\*सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

**\*\*CAUTION:** THIS MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON LINKS OR OPEN ATTACHMENTS UNLESS YOU KNOW THE SENDER.



**Dear NITISHA K,**

Greetings from Apollo Clinics,

Your corporate health check appointment is confirmed at **A.S. RAO NAGAR clinic** on **2024-11-09** at **08:30-08:45**.

Payment Mode	
Corporate Name	<b>ARCOFEMI HEALTHCARE LIMITED</b>

Agreement Name	[ARCOFEMI MEDIWHEEL FEMALE AHC CREDIT PAN INDIA OP AGREEMENT]
Package Name	[ARCOFEMI - MEDIWHEEL - FULL BODY HEALTH ANNUAL PLUS CHECK - FEMALE - 2D ECHO - PAN INDIA - FY2324]

**"Kindly carry with you relevant documents such as HR issued authorization letter and or appointment confirmation mail and or valid government ID proof and or company ID card and or voucher as per our agreement with your company or sponsor."**

**Note: Video recording or taking photos inside the clinic premises or during camps is not allowed and would attract legal consequences.**

**Note: Also once appointment is booked, based on availability of doctors at clinics tests will happen, any pending test will happen based on doctor availability and clinics will be updating the same to customers.**

#### **Instructions to be followed for a health check:**

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning. If any medications taken, pls inform our staff before health check.
3. Please bring all your medical prescriptions and previous health medical records with you.
4. Kindly inform our staff, if you have a history of diabetes and cardiac problems.

#### **For Women:**

1. Pregnant women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any health check during menstrual cycle.

**For further assistance, please call us on our Help Line #: 1860 500 7788.**

**Clinic Address: A-12, # 1-9-71/A/12/B, RISHAB HEIGHTS, RUKMINIPURI HOUSING COLONY, A.S.RAO NAGAR.**

**Contact No: (040) 48522317.**

P.S: Health Check-Up may take 4 - 5hrs for completion on week days & 5 - 6hrs on Saturdays, kindly plan accordingly, Doctor Consultation will be completed after all the Reports are ready.

Warm Regards,  
Apollo Clinic

#### **अस्वीकरण:**

\*\*\*\*\*

**\*\* यह ईमेल (किसी भी संलग्नक सहित) केवल अपेक्षित प्राप्तकर्ता/ओं के उपयोग के लिए है और इसमें ऐसी सामग्री हो सकती है जो कंपनी की गोपनीय और निजी सूचना हो. दूसरों द्वारा इसमें कोई भी संशोधन या इसे आधार बनाना या**

इस संदेश की किसी भी या सभी सामग्री को कॉपी करना या वितरित करना या अग्रेषित करना पूरी तरह से वर्जित है। यदि आप अपेक्षित प्राप्तकर्ता नहीं हैं, तो कृपया ईमेल द्वारा संबंधित प्रेषक से संपर्क करें और सभी प्रतियां हटा दें। इस संबंध में आपका सहयोग वांछनीय है।

\*\*\*\*\*

\*\* Disclaimer:

\*\*\*\*\*

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\*\*\*\*\*

\*\*



**Apollo Clinic**  
PHYSICAL EXAMINATION FORM



Date

9/11/24

UHID

190903

Name

Mrs. Nikheesha

Age

28/R

Height

151

Cms

Weight

46.2

Kgs

Chest Measurement

(in)cm

(out)cm

Waist

cm

HIP

Pulse

Bt/Min

BMI

20

kgs/cm<sup>2</sup>

BP

90/60

mm/Hg

SPO<sub>2</sub>

%

Apollo Clinic, A.S. Rao Nagar.

# POWER PRESCRIPTION

NAME: Mrs. Nikheesha. ch

GENDER: M/F

DATE: 09/11/24

AGE: 28

UHID:

## RIGHT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	—	0.50	180	6/6
NEAR	—	—	—	N6

## LEFT EYE

	SPH	CYL	AXIS	VISION
DISTANCE	—	—	—	N6
NEAR	—	—	—	N6

COLOUR VISION : Normal

DIAGNOSIS :

OTHER FINDINGS :

INSTRUCTIONS :



SIGNATURE

**Apollo Health and Lifestyle Limited**

(CIN:U85102TN2000PLC046089) Regd. Office: 19 Bishop Gardens, RA Puram, Chennai 600 028, Tamil Nadu, India | Email ID: info@apollohl.com

APOLLO CLINICS NETWORK TELANGANA

Hyderabad (AS Rao Nagar | Chanda Nagar | Jubilee Hills | Kondapur | Manikonda | Nallakunta | Nizampet | Uppal)

Online appointments: www.apolloclinic.com

TO BOOK AN APPOINTMENT

 **1860 500 7788**

# ORAL EXAMINATION FORM



Date: 09/11/2024

Patient ID: \_\_\_\_\_ MHC

Patient Name: Nikasha - C Age: 28 Sex: Male  Female

Chief Complaint: P.H. Came for general dental check up.

Medical History: NRH

Drug Allergy: NRH

Medication currently taken by the Guest: -

Initial Screenign Findings :

Dental Caries : 8

Missing Teeth : -

Impacted Teeth : 8

Attrition / Abrasion : -

Bleeding : -

Pockets / Recession : -

Calculus / Stains : -

Mobility : -

Restored Teeth : -

Non - restorable Teeth for extraction /  
Root Stumps : 8

Malocclusion : -

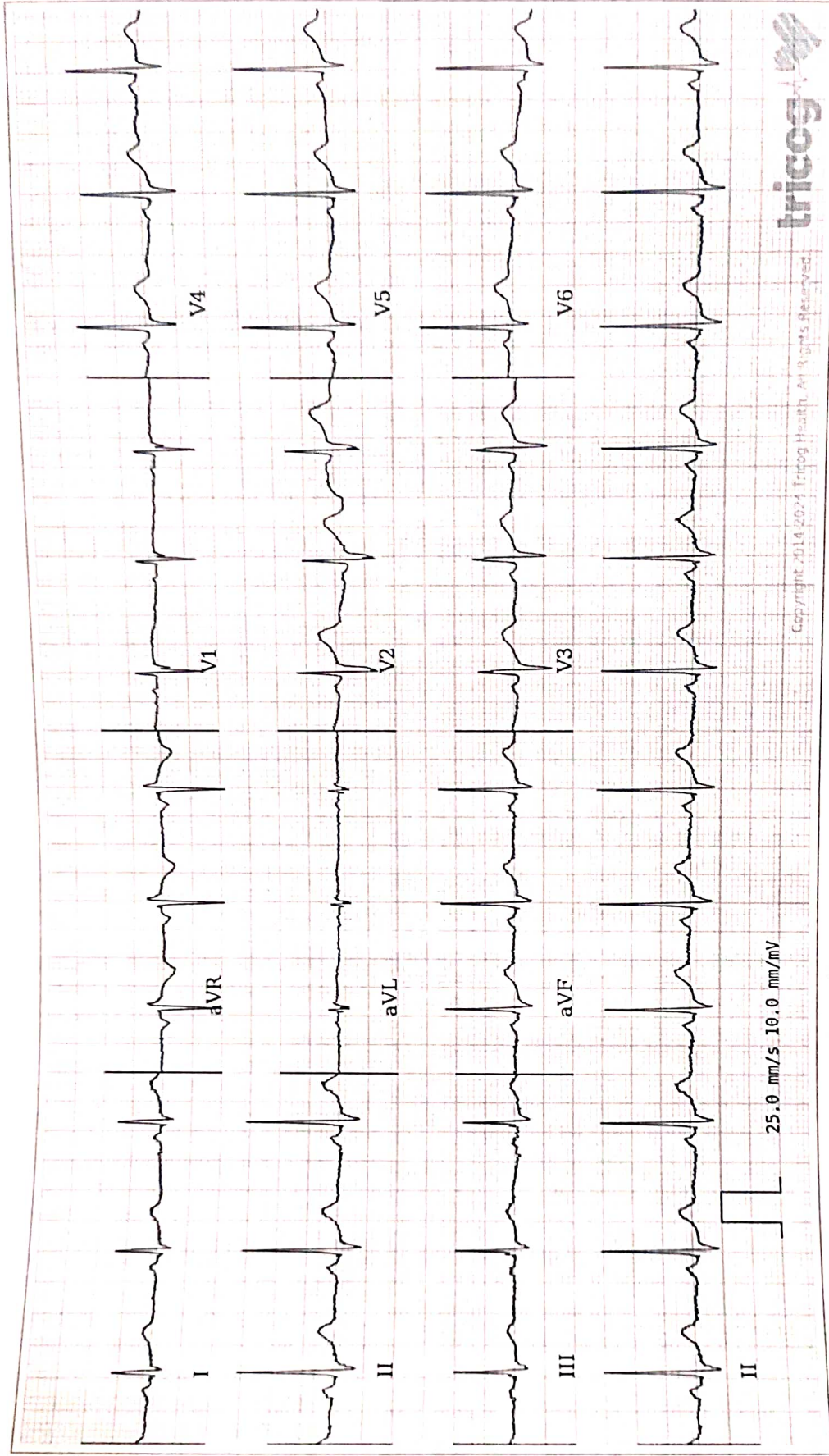
Others : -

Advice :- Advised ~~OPG~~ OPG.

Doctor  
Name & Signature: Dr. Kalai Selvi.

28/Female  
09/11/2024 11:17 AM





ECG Within Normal Limits: Sinus Rhythm, Normal ECG, correlate clinically. Please correlate clinically.

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other invasive and non-invasive tests and must be interpreted by a qualified physician.

REPORTED BY



P-R-T: 50° 67° 50°

PRI: 130ms

QTcB: 431ms

QT: 386ms

QRS: 82ms

VR: 75bpm

AR: 75bpm

**CERTIFICATE OF MEDICAL FITNESS**

This is to certify that I have conducted the clinical examination

of Mrs. Nikheeta chowpally on 12/11/24

After reviewing the medical history and on clinical examination it has been found that he/she is

	Tick
<ul style="list-style-type: none"> <li>• Medically Fit</li> </ul>	✓
<ul style="list-style-type: none"> <li>• Fit with restrictions/recommendations</li> </ul> <p>Though following restrictions have been revealed, in my opinion, these are not impediments to the job.</p> <p>1.....</p> <p>2.....</p> <p>3.....</p> <p>However the employee should follow the advice/medication that has been communicated to him/her.</p> <p>Review after _____</p>	
<ul style="list-style-type: none"> <li>• Currently Unfit.</li> </ul> <p>Review after _____ recommended</p>	
<ul style="list-style-type: none"> <li>• Unfit</li> </ul>	



Dr. Dr. Gunshavi  
Medical Officer  
Regd. No. TSMC/12108

*This certificate is not meant for medico-legal purposes*